

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/047,078	
	Filing Date	January 14, 2002	
	First Named Inventor	CHISHTI, MUHAMMAD	
	Art Unit	3732	
	Examiner Name	Unassigned	
Total Number of Pages in This Submission	6	Attorney Docket Number	018563-005110US / AT-00108.1

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input checked="" type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Return Postcard
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

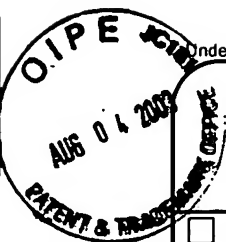
**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual	Townsend and Townsend and Crew LLP James M. Heslin	Reg. No. 29,541
Signature		
Date	August 1, 2003	

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	JoAnn Evangelista		
Signature		Date	August 1, 2003



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# FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ ) 130

Complete if Known

Application Number	10/047,078
Filing Date	January 14, 2002
First Named Inventor	CHISHTI, MUHAMMAD
Examiner Name	Unassigned
Art Unit	3732
Attorney Docket No.	018563-005110US

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ MoneyOrder ☐ Other ☐ None

☒ Deposit Account:

Deposit  
Account  
Number

20-1430

Deposit  
Account  
Name

Townsend and Townsend and Crew LLP

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments  
☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1001	750	2001	375	Utility filing fee
1002	330	2002	165	Design filing fee
1003	520	2003	260	Plant filing fee
1004	750	2004	375	Reissue filing fee
1005	160	2005	80	Provisional filing fee

Fee Paid

SUBTOTAL (1)

(\$ )

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fees from below	Fee Paid
Total Claims	<input type="text"/>	<input type="text"/>	<input type="text"/>
Independent Claims	<input type="text"/>	<input type="text"/>	<input type="text"/>
Multiple Dependent	<input checked="" type="checkbox"/>	<input type="text"/>	<input type="text"/>

Large Entity

Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$ )

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large	Entity	Small	Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	TERMINAL DISCLAIMER	
1006	180	1806	180	Petitions related to provisional applications	
8021	40	8021	40	Submission of Information Disclosure Stmt	
1809	750	2809	375	Recording each patent assignment per property (times number of properties)	
1810	750	2810	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1801	750	2801	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1802	900	1802	900	Request for Continued Examination (RCE)	
				Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid SUBTOTAL (3)

(\$130)

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)

James M. Heslin

Registration No. (Attorney/Agent)

29,541

Telephone

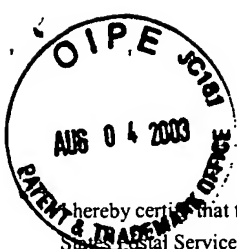
650-326-2400

Signature

Date

August 1, 2003

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450 On August 1, 2003

**PATENT**  
Attorney Docket No.: 018563-005110US  
Client Ref. No.: AT00108.1

TOWNSEND and TOWNSEND and CREW LLP

By: JoAnn Evangelista  
JoAnn Evangelista

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

MUHAMMAD CHISHTI et al.

Application No.: 10/047,078

Filed: January 14, 2002

For: **SYSTEM FOR DETERMINING  
FINAL POSITION OF TEETH**

Examiner: John J. Wilson

Technology Center/Art Unit: 3732

**RESPONSE**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed June 20, 2003, Applicants submit a Terminal Disclaimer over U.S. Patent Nos. 6,406,292 and 5,975,893. As all pending claims were rejected only for double patenting over these two prior patents, it is believed that all claims are now in condition for allowance and request that the application be passed to issue at an early date.

If for any reason the Examiner believes that a telephone conference would in any way expedite prosecution of the subject application, the Examiner is invited to telephone the undersigned at (650) 326-2400.

Respectfully submitted,

James M. Heslin  
Reg. No. 29,541

Enclosure: *Terminal Disclosure*

TOWNSEND and TOWNSEND and CREW LLP  
Two Embarcadero Center, 8<sup>th</sup> Floor  
San Francisco, California 94111-3834  
Tel: 650-326-2400 / Fax: 415-576-0300  
JMH:ao /jke 23320591 v1

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